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APPLICATION NUMBER

FILING DATE CLASS SUBCLASS GROUP ART UNIT EXAMINER

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EXAMINER

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NOTICE OF ALLOWANCE MAILED			CLAIMS ALLOWED			
		Assistant Examiner	Total Claims		Print Claim for O.G	
			DRAWING		G	
ISSUE FEE			Sheets Drwg.	Figs.Drw	g. Print Fig.	
Amount Due	Date Paid	1]	į ·	
	<u> </u>	Primary Examiner			<u> </u>	
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